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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Issuance of RFA** | | |  | | | | **Name of Office / Process** | | |  | | | | | | |
|  | | |  |  | | |  |  | | | | | |  |  |  |
| **Name of Process Owner** | | |  | | | | | **Position/Designation** | | |  | | | | | |
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| **FISH BONE DIAGRAM**  **PROBLEM**  **(Audit Finding)**  **ENVIRONMENT**  **MEASUREMENT**  **MATERIAL**  **MACHINE**  **METHODS**  **MANPOWER** | | | | | | | | | | | | | | | | |
| **Why 1** |  | | | | | | | | | | | **ROOT CAUSE** | | | | |
| **Why 2** |  | | | | | | | | | | |  | | | | |
| **Why 3** |  | | | | | | | | | | |
| **Why 4** |  | | | | | | | | | | |
| **Why 5** |  | | | | | | | | | | |
| Signature of  Process Owner | |  | | | **Responsible Officer** | Name | | |  | | | | ***I hereby affix my signature to acknowledge that my office is responsible for the root cause of the audit finding; thus, I am tasked to prepare the corrective action plan to address it:*** | | | |
|  | |  | | | Position | | |  | | | |  | | | |